CLAIMS ONLY			Application Number 10/686520	Filing Date
			Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1	/						51			/				
2		/					52			/				
3		/					53	/						
4		/					54			/				
5		/					55			/				
6	/						56			/				
7	/						57			/				
8	/						58							
9		/					59			/				
10		/					60	/						
11	/						61	/						
12	/						62							
13	/						63							
14	/						64							
15	/						65							
16	/						66							
17	/						67							
18	/						68							
19		/					69							
20	/						70							
21	/						71							
22	/						72							
23	/						73							
24	/						74							
25		/					75							
26		/					76							
27		/					77							
28		/					78							
29	/						79							
30		/					80							
31	/						81							
32		/					82							
33		/					83							
34		/					84							
35	/						85							
36		/					86							
37		/					87							
38	/						88							
39		/					89							
40		/					90							
41							91							
42							92							
43							93							
44	/						94							
45		/					95							
46		/					96							
47		/					97							
48	/						98							
49		/					99							
50		/					100							
Total Indep	23						Total Indep	3						
Total Depend	27						Total Depend	8						
Total Claims	50						Total Claims	11						

11
61